## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docfiet No. | 42P18177

First Inventor | Christopher J. Cormack, et al.

SYSTEM AND METHOD FOR ALLOWING TIME-SHIFTED SO ACCESS TO MULTIPLE PROGRAMS AT THE SAME TIME

(Only for new nonpr	rovisional applications under 37 CFR 1.53(b))	il Label No.	EV3	5	10/				
	APPLICATION ELEMENTS			DECC =	Commis	Patent Application signer for Patents	N =		
	oter 600 concerning utility patent application	<u> </u>	RESS T	O: P.O. Box Alexanda	k 1450 ria, VA 22313-1450				
	nsmittal Form (e.g., PTO/SB/17) original and a duplicate for fee processing)		_ c	omputer	or CD-R in duplica Program ( <i>Append</i>	dix)			
	it claims small entity status. CFR 1.27.				nd/or Amino Aci e, all necessary)		Submission		
Specification [Total Pages 26]  (preferred arrangement set forth below)  - Descriptive title of the Invention  - Cross References to Related Applications  - Statement Regarding Fed sponsored R & D  - Reference to sequence listing, a table, or a computer program listing appendix  - Background of the Invention  - Brief Summary of the Invention				Specific i. 🔲 ( ii. 🔲 p	mputer Readab cation Sequence CD-ROM or CD- caper atements verifyir	Listing on: R (2 copies)	or		
- Detailed - Claim(s) - Abstract  4. Drawing(  5. Oath or Declar  a. N	t of the Disclosure (s) (35 U.S.C. 113) [Total Sheets <u>7</u> laration (signed) [Total Pages <u>4</u> ewly executed (original or copy)	1.1	10.	7 C.F.R.  when ther  nglish Tr.  nformatio  tatement  reliminar  eturn Re  Should be	nent Papers (cover sheet & docur R. § 3.73(b) Statement here is an assignee) Translation Document (if application Disclosure ent (IDS)/PTO-1449 hary Amendment Receipt Postcard (MPEP 503) be specifically itemized) d Copy of Priority Document(s)		Power of Attorney		
	opy from a prior application (37 C.F.F or continuation/divisional with Box 18	(i	f foreign	priority is claimed	)				
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).				pplicant i other:	olication Request under 35 U.S.C. 122 (b)(2)(B)(i). Int must attach form PTO/SB/35 or its equivalent.  CHECK FOR \$842.00  CHECK FOR \$40.00				
6. Applicati	on Data Sheet. See 37 CFR 1.76								
specification follov —	JING APPLICATION, check appropri	a Sheet under	37 CFR 1	.76:			sentence of the		
Continu		ntinuation-in-p	aπ (CIP)		of prior applicatio		·		
Prior application Information: Examiner Group/Art Unit:									
	18	3. CORRESP	ONDENCE	ADDRE	SS				
Customer I	Number 08	791			or [	Correspor	ndence address below		
Name	Blakely, Sokoloff, Taylor & Za	fman LLP							
Address	5285 S.W. Meadows Road, Sui				-				
City	Lake Oswego	Sta	ate C	Oregon		Zip Code	97035		
Country		Telephon		503) 68		Fax	(503) 684-3245		
Name (Print/	Type) Gregory D. Caldwell	11/1			egistration No. (At		39,926		
Signature	- In	III				Date 1	1/26/03		

FEE TRANSMITTAL						Complete if Known					-		
		Application	n Nun	nber			_						
	5	Filing Dat	e		Nov	ember 26, 2	2003						
Effective (		First Nam	ed Inv	entor	Chri	stopher J. (	Cormack						
Applicant	claims sma	Il entity status	s. See 37 (	CFR 1.27.		Examiner	Name	)					
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METHOD OF PAYMENT (check all that apply)						FEE CALCULATION (continued)							
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Charge any addit	tional fee(s) req	uired under 37 Cl	FR §§ 1.16, 1.1	7, 1.18 and 1.20	1805	5 1,840*	1805	1,840 *	Requesting publication	on of SIR after			
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1002 340 20	002 170	Design filing fee	3		1402		2402	165	Filing a brief in suppo				
1003 530 20	003 265	Plant filing fee			1403		2403	145	Request for oral hear	•	_		
1004 770 20	004 385	Reissue filing fe	е		1451			1,510	Petition to institute a	•	ding		
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2. EXTRA CLAIM FEES <sub>Extra</sub> Fee from					1501 1502		2501 2502	665 240	Utility issue fee (or re Design issue fee	eissue)			
2. EXTRA	CLAIM FE	Claims	Fee from below	Fee Paid	1503		2503	320	Plant issue fee				
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		Multiple Depende **Reissue indeper			1801	770	2801	385	Request for Continue	d Examination (R	CE)		
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1205 18 2205 9 **Reissue claims in excess of 20 and over				Other	fee (specify)			of a design applicatio	n				
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**or numbe	Redu	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)					40.00						
SUBMITTED					/				Comp	lete (if applic	able)		
Name (Print/Type)	1	ry D. Caldy	well	1/1/	T = T	Registratio Attorney/Age	n No.	3	9,926	Telephone	(503) 68		
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11/26/03

Date

Signature